

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature

X VB Cov 19

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Liz Matteson

C. Date of Delivery

8-26-20

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

1. Article Addressed to:

SOUTHERN AUTO SALES, INC
164 SOUTH MAIN ST
EAST WINDSOR, CT
06088

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7019 2970 0000 1644 0389